

## PART B - FEE(S) TRANSMITTAL

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909 7590 09/21/2007

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Stamford, CT 06901

12/04/2007 HDEMESS2 00000048 110404 10790647

01 FC:1501 1440.00 DA  
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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Hans-Peter G. Hoffmann, Ph.D.	(Depositor's name)
<i>Hans-Peter G. Hoffmann</i>	(Signature)
December 3, 2007	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/790,647	03/01/2004	Braj Bhushan Lohray	CHL-102(C)	9757

**TITLE OF INVENTION: NOVEL HETEROCYCLIC COMPOUNDS, THEIR PREPARATION, PHARMACEUTICAL COMPOSITIONS CONTAINING THEM AND THEIR USE IN MEDICINE**

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	12/21/2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
SACKY, EBENEZER O	1624	514-427000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
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2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Kelley Drye & Warren LLP  
2 \_\_\_\_\_  
3 \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Cadila Healthcare Limited

Gujarat, India

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

4a. The following fee(s) are submitted:

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 Publication Fee (No small entity discount permitted)  
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 The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 11-0404 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature *Hans-Peter G. Hoffmann*

Date December 3, 2007

Typed or printed name Hans-Peter G. Hoffmann

Registration No. 37,352

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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**NO. OF PAGES** 2 (including this page)  
**DATE** December 3, 2007

KELLEY DRYE & WARREN LLP  
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 06901-3229  
 (203) 324-1400  
 FAX (203) 927-2669

**MESSAGE:** Re: U.S. Patent Application S/N 10/790,647

Please find enclosed Part B – Fee(s) Transmittal for payment of the issue fee and publication fee for a small entity for a total of \$1,000.00 with reference to the above identified U.S. patent application. Please charge our Deposit Account No. 11-0404 the required fees and/or credit any overpayment.

Please contact us if you have any questions.

Sincerely,

Hans-Peter G. Hoffmann  
Agent for Applicant

**FROM** Hans-Peter G. Hoffmann, Reg. No. 37,352  
**PHONE** (203) 351-8011  
**E-MAIL** [hhoffmann@kelleydrye.com](mailto:hhoffmann@kelleydrye.com)  
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**CLIENT NO.** 016882-0005 – CHL-102(C)

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PAGE 1/2 \* RCVD AT 12/3/2007 3:21:11 PM [Eastern Standard Time] \* SVR:USPTO-EFXRF-1/16 \* DNIS:2732885 \* CSID: \* DURATION (mm:ss):01-02